Image# 29992464569

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions		Office use only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Bank of America	Corporation State and Federal	PAC	11111111111	
				 l
ADDRESS (number and stre	1100 North King Stree	et		
(Check if address	DE5-001-02-07	11111111	11111111111	لـــــا
is changed)	Wilmington		DE 19884	
		CITY	STATE▲ ZIP CODE ▲	
COMMITTEE'S E-MAIL	ADDRESS (Please provide only one e-m			
(Check if address is changed)	wendy.jamison@bank	cofamerica.com		لــــا
				Щ
COMMITTEE'S WEB PA	GE ADDRESS (URL)			
(Check if address	N/A		<u> </u>	Ш
is changed)				ш
2. DATE 0.7	/ D D / Y Y Y Y Y A D D D D D D D D D D D D D D			
3. FEC IDENTIFICATION	ON NUMBER	C00043489		
4. IS THIS STATEMEN	NT NEW (N) OR	X AMENDED (A)		
I certify that I have examined	d this Statement and to the best of my know	ledge and belief it is true, correct	and complete	
	Pasurer Wendy Jamison			
Type or Print Name of Tre	easurer			
Signature of Treasurer	Electronically Filed by Wendy Jam	nison	Date 07 16 20	0 [°] 0 9 [°]
NOTE: Submission of false,	erroneous, or incomplete information may		atement to the penalties of 2 U.S.C. §437g.	
Office		For further information		
Use Only		Federal Election Comm Toll Free 800-424-9530	331011	

	F	FEC F	Form 1 (Revised 02/2009)	Page 2				
5.			OMMITTEE (Check One) Committee:					
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.)	he candidate				
	Name Candi							
	Candi Party	idate Affiliatio	on Office Sought: House Senate President	State District				
	(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name Candi							
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political Action Committee (PAC):							
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:				
			X Corporation Corporation w/o Capital Stock La	bor Organization				
			Membership Organization Trade Association Co	poperative				
			χ In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party				
			In addition, this committee is a Lobbyist/Registrant PAC.					
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint F	Fundra	ising Representative:					
	Joint Fundraising Representative: (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more po committees/organizations, at least one of which is an authorized committee of a federal candidate.							
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political				
		Com	mittees Participating in Joint Fundraiser					
			1. FEC ID number					
			2. FEC ID number					
			3. FEC ID number					
			. FEC ID number C					

	FEC Form 1 (Revised 02	/2009)			Page 3	į.
W	rite or Type Committee Name					
	Bank of America Corpor	ration State and Federal PAC	:			
6.	Name of Any Connected Org	ganization, Affiliated Committee, c	Joint Fundraising Represent	ative, or Leade	rship PAC Sponso	r
	Bank of America Corpora	ation				
1			1 1 1 1 1 1 1 1 1		<u> </u>	
	Mailing Address	100 North Tryon	St.			
		Charlotte		NC _	28255	
		CITY▲	s	STATE A	ZIP CODE	A
	Relationship:					
	X Connected Organization	Affiliated Committee	Joint Fundraising Repre	sentative	Leadership PAC S	ponsor
7.	possession of Committee Full Name Wendy	books and records. Jamison		position of th	e person in	
	Mailing Address		Street			
				DE	10004	
				<u>DE</u> _	19004	
	Title or Position ▼ Treasurer	CITY A		200		=
8.	name and address of any	**	• ,	of the commit	itee; and the	
	Mailing Address	1100 North King	g Street			
	Walling Address	DE5-001-02-07				
		Wilmington		DE	19884	
	Title or Position ♥	CITY A		STATE A	ZIP CODE	Δ.
	Treasurer		Telenhone numh	302	_ 432 _	0956
	-		CITY A STATE A ZIP CODE A CITY A STATE A ZIP CODE A Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor In and records. Son 1100 North King Street DE5-001-02-07 Wilmington DE 19884 CITY A STATE A ZIP CODE A Telephone number 302 _ 432 _ 0956 Indicess (phone number optional) of the treasurer of the committee; and the nated agent (e.g., assistant treasurer). Son 1100 North King Street DE5-001-02-07 Wilmington DE 19884 STATE A ZIP CODE A Telephone number 302 432 0956 Son 1100 North King Street DE5-001-02-07 Wilmington DE 19884 CITY A STATE A ZIP CODE A Telephone number 302 432 0956 Son			

	(Revised 02/2	J0 3)		Page 4
Full Name of Designated Agent		James E Mahoney		
Mailing Address	·	100 Federal Street		
		26th Floor MA5-100-26-01		
		Boston	MA	02110 –
Title or Position ▼		CITY A	STATE 🛦	ZIP CODE A
c	Chairman	Tel	ephone number 617	4349552
9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				ds accounts, rents
	Bank of	America 		
Mailing Address		901 W. Trade Street		
	L	Charlotte	NC	28255
	L	Charlotte CITY 🛆	NC STATE 2	28255 ZIP CODE
Name of Bank, De	epository, etc.			
Name of Bank, De	epository, etc.			
Name of Bank, De	epository, etc.		STATE	ZIP CODE A
	epository, etc.	CITY 🗖	STATE	ZIP CODE A
	epository, etc.	CITY 🗖	STATE	ZIP CODE A

A. Form/Schedule : **F1A**Transaction ID :

The Statement of Organization is being amended to disclose the new address for the affiliated committee. Please update your records accordingly.

Banks or Other Depositories safety deposit boxes or mainta		ommittee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc			[ADDITIONAL]
Mailing Address			
	CITY 🙇	STATE_	ZIP CODE 🛕
Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundraising	Representative, or Leader	[ADDITIONAL] ship PAC Sponsor
Mailing Address	1455 Pennsylvania Ave NW		
	Suite 950 DC8-455-09-01		
	Washington		20004
elationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising	g Representative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
	d N Burgess		
Mailing Address	333 S. Hope Street		
	20th Floor CA9-193-20-15		
	Los Angeles	CA	90071 _
Title or Position ▼	CITY	STATE ▲	ZIP CODE A
Assistar	nt Treasurer Te	213 elephone number	621 7404
Joint Fundraiser Participant		FEC ID number C	[ADDITIONAL]